



The student registration kit contains:

- Registration Form
- FOIP Form and Anti-spam Authorization

You must also provide these documents:

- Proof of ID
- Legal documents (guardianship, adoption, other)
- Copy of most recent report card
- Specialist reports, if applicable

Expected entry date (D/M/Y): _____

Student's name: _____

School's name: _____

For office use only

Date d'inscription (J/M/A) _____

Niveau scolaire _____

ASN _____

Documents fournis

- Preuve d'identité :
 - Certificat de naissance
 - Passeport
 - Document de résidence permanente
 - Document de citoyenneté canadienne
 - Permis d'études
- Documents légaux (tutelle, adoption, autre)
 - Précisez : _____
- Copie du plus récent bulletin
- Rapports de spécialistes

Formulaires complétés et/ou signés

- Formulaire d'inscription
- FOIP
- Formulaire non-ayant droit (au besoin)
 - Demande de dossier de l'élève

Approbation

- La demande d'inscription de l'élève est APPROUVÉE
- La demande d'inscription de l'élève est REFUSÉE
- La demande d'inscription de l'élève est EN ATTENTE en raison de :

Signature de la direction générale ou de la direction générale adjointe

Date

CONSEIL SCOLAIRE CENTRE-NORD LIST OF SCHOOLS

EDMONTON

À la Découverte (K-6)

10935 113 Street NW
Edmonton AB T5H 3J4
Phone: 780-474-9547
Fax: 780-474-9356
ld@centrenord.ab.ca

Gabrielle-Roy (K-6)

8728 93 Avenue NW
Edmonton AB T6C 1T8
Phone: 780-457-2100
Fax: 780-472-7855
gr@centrenord.ab.ca

Joseph-Moreau († 7-9)

9750 74 Avenue NW
Edmonton AB T6E 1E8
Phone: 780-436-6303
Fax: 780-436-6309
jm@centrenord.ab.ca

Maurice-Lavallée († 10-12)

8828 95 Street NW
Edmonton AB T6C 4H9
Phone: 780-465-6457
Fax : 780-468-0078
ml@centrenord.ab.ca

Michaëlle-Jean (7-12)

10005 84 Street NW
Edmonton AB T6A 3P8
Phone: 587-463-0257
Fax: 587-463-1545
mj@centrenord.ab.ca

Notre-Dame († K-6)

15425 91 Avenue NW
Edmonton AB T5R 4Z7
Phone: 780-484-6955
Fax: 780-484-7065
nd@centrenord.ab.ca

Père-Lacombe († K-6)

10715 131A Avenue NW
Edmonton AB T5E 0X4
Phone: 780 478-9389
Fax: 780 478-9210
pl@centrenord.ab.ca

Sainte-Jeanne-d'Arc († K-6)

8505 68A Street NW
Edmonton AB T6B 0J9
Phone: 780-466-1800
Fax: 780-465-1108
ja@centrenord.ab.ca

BEAUMONT

Saint-Vital († K-8)

5505 Magasin Avenue
Beaumont AB T4X 1V8
Phone: 780-929-1183
Fax: 780-929-1198
sv@centrenord.ab.ca

CAMROSE

École des Fondateurs (K-9)

4707 56 Street
Camrose AB T4V 2C4
Phone: 587-769-0144
Fax: 587-769-0145
df@centrenord.ab.ca

FORT MCMURRAY

Boréal († K-12)

312 Abasand Drive
Fort McMurray AB T9J 1B2
Phone: 780-791-0200
Fax: 780-791-5391
bo@centrenord.ab.ca

JASPER

Desrochers (K-12)

302 Elm Avenue, P.O. Box 160
Jasper AB T0E 1E0
Phone: 780-852-1119
Fax: 780-852-1190
dr@centrenord.ab.ca

LEGAL

Citadelle († K-9)

5109 46 Street, P.O. Box 28
Legal AB T0G 1L0
Phone: 780-961-3557
Fax: 780-961-3405
cd@centrenord.ab.ca

LLOYDMINSTER

Sans-Frontières (K-12)

4204 54 Avenue
Lloydminster AB T9V 2R6
Phone: 780-875-0251
Fax: 780-875-2570
sf@centrenord.ab.ca

RED DEER

La Prairie († K-12)

4810 34 Street
Red Deer AB T4N 4R6
Phone: 403-343-0060
Fax: 403-343-7001
lp@centrenord.ab.ca

SAINT-ALBERT

Alexandre-Taché († 7-12)

30 Erin Ridge Drive
St. Albert AB T8N 5S5
Phone: 780-458-4878
Fax: 780-458-8459
at@centrenord.ab.ca

La Mission († K-6)

46 Heritage Drive
St. Albert AB T8N 7J5
Phone: 780-459-9568
Fax: 780-459-9587
lm@centrenord.ab.ca

SHERWOOD PARK

École Claudette-et-Denis-Tardif (K-6)

10 Hawkins Crescent
Sherwood Park AB T8A 3P2
Phone: 587-745-0404
et@centrenord.ab.ca

WAINWRIGHT

Saint-Christophe († K-12)

214 8 Street
Wainwright AB T9W 2R2
Phone: 780-842-2827
Fax: 780-842-2865
sc@centrenord.ab.ca

† denotes a Catholic school

For information on school zones, visit our website (in French): centrenord.ab.ca/programmes-services/transport/aires-de-frequentation

PLEASE SELECT YOUR SCHOOL

- Edmonton** À la Découverte
 Gabrielle-Roy
 Joseph-Moreau
 Maurice-Lavallée
 Michaëlle-Jean
 Notre-Dame
 Père-Lacombe
 Sainte-Jeanne-d'Arc
 Saint-Vital
- Beaumont**
Camrose École des Fondateurs

- Fort McMurray** Boréal
Jasper Desrochers
Legal Citadelle
Lloydminster Sans-Frontières
Red Deer La Prairie
St-Albert Alexandre-Taché
St-Albert La Mission
Sherwood Park Claudette-et-Denis-Tardif
Wainwright Saint-Christophe

How did you hear about the Conseil scolaire Centre-Nord (CSCN) or the school your child will attend for the current school year? Please check only one of these answers that best corresponds to your situation.

- Word of mouth
- Le Franco newspaper
- Edmonton Journal
- Your local newspaper
- A billboard on the road
- Advertising in a grocery store
- Advertising in the community
- Postcard
- Bookmarks
- Conseil scolaire Centre-Nord (CSCN) Website
- School Website
- Facebook
- Twitter
- An agent of the Centre d'accueil et d'établissement
- Other (please specify): _____

ELIGIBILITY

According to Sec. 23 of the Canadian *Charter of Rights and Freedom*, the right to minority language education is guaranteed if at least one of the two parents:

- 1) **has French as a first language learned and still understood, or;**
- 2) **has received her/his primary school instruction in French first language in Canada, or;**
- 3) **has a child who has received or is receiving primary or secondary instruction in French first language in Canada.**

The child of a Canadian citizen is eligible to receive French first language education if at least one of these three conditions are met:

Please answer all three questions:

- French is the first language learned and still understood by one or the other parent Yes No
- At least one parent has received her/his primary education in Canada in French Yes No
- A brother/or sister has received or is receiving primary or secondary education in French in Canada Yes No

For any non-eligible student registration, please contact the school principal directly (or the central office when the school is closed) to make an appointment.

FIRST LANGUAGE(S) OF THE STUDENT

French English Other : _____
Language(s) spoken by the child _____

STUDENT INFORMATION

Legal verification: A student cannot be registered without a copy of a legal document that provides proof of **legal name, age** (e.g. Canadian birth certificate, permanent residency certificate, Canadian citizenship document or student visa) and **his/her legal status in Canada**.

Legal last name _____

Legal first name _____

Preferred first name _____ Preferred last name _____

Date de naissance _____ Female Male Other
Day Month Year

Phone (main) _____ Phone (secondary) _____

Please specify Cell Home Cell Home Other

Student's physical address _____
Civic number Street (name, type and direction) Apartment

City or Town Province Postal code

Please check here if the student's mailing address is the same as the physical address

Student's mailing address _____
Civic number Street (name, type and direction) Apartment

City or Town Province Postal code

TRANSPORTATION

Bus service requested Pick-up Drop-off None
Pick-up location Home Daycare Other _____

Name of daycare provider _____ **Phone** _____
(if applicable)

Physical address _____
(if different from student's address)
Civic number Street (name, type and direction) Apartment

City or Town Province Postal code

Drop-off location Home Daycare Other _____

Name of daycare provider _____ **Phone** _____
(if applicable)

Physical address _____
(if different from student's address)
Civic number Street (name, type and direction) Apartment

City or Town Province Postal code

INDEPENDENT STUDENT STATUS

According to the Alberta School Act, an **independent student** is:

- 1) 18 years old or older, or;
- 2) 16 years old or older *AND*
 - i) who is living independently, or;
 - ii) is part of a third party agreement signed according to section 57.2 of the Child, Youth and Family Enhancement Act.

Is the student claiming "**independent student status**" as defined by the School Act? Yes No

STUDENT STATUS IN CANADA

Please check the status of the student and attach a copy of their Canadian birth certificate, permanent residence document, Canadian citizenship document or study permit.

- Canadian citizen
 Permanent resident
 Child of individual legally admitted to Canada as permanent or temporary resident
 Temporary resident (student permit), expiration date _____
 Refugee status, expiry date _____

Country of origin _____ **Date of arrival in Canada** _____
Day Month Year

SUPPORT FOR STUDENTS OF IMMIGRANT ORIGIN

Service available only to permanent residents.

To receive support services for newcomers, do you authorize the CSCN to share your information with the Centre d'accueil et d'établissement? Yes No

INFORMATION ON PARENTS/LEGAL GUARDIANS

FIRST PARENT / LEGAL GUARDIAN

Relationship to student

Legal mother

Legal father

Legal guardian

Lives with student

Yes

No

Last name _____

First name _____

Address

(if different from student's address)

Civic number

Street (name, type and direction) or P.O. Box

Apartment

City or Town

Province

Postal code

Phone (home) _____

Phone (work) _____

Phone (cell) _____

Email _____

Language(s) spoken : _____

SECOND PARENT / LEGAL GUARDIAN

Relationship to student

Legal mother

Legal father

Legal guardian

Lives with student

Yes

No

Last name _____

First name _____

Address

(if different from student's address)

Civic number

Street (name, type and direction) or P.O. Box

Apartment

City or Town

Province

Postal code

Phone (home) _____

Phone (work) _____

Phone (cell) _____

Email _____

Languages(s) spoken : _____

THIRD CONTACT / EMERGENCY CONTACT OTHER THAN PARENT/LEGAL GUARDIAN

Relationship to student

Parent's spouse

Other _____

Lives with student

Yes

No

Last name _____

First name _____

Address

(if different from student's address)

Civic number

Street (name, type and direction) or P.O. Box

Apartment

City or Town

Province

Postal code

Phone (home) _____

Phone (work) _____

Phone (cell) _____

Email _____

FOURTH CONTACT (OPTIONAL)

Relationship to student

Parent's spouse

Other _____

Lives with student

Yes

No

Last name _____

First name _____

Address

(if different from student's address)

Civic number

Street (name, type and direction) or P.O. Box

Apartment

City or Town

Province

Postal code

Phone (home) _____

Phone (work) _____

Phone (cell) _____

Email _____

SIBLINGS ATTENDING THIS OR ANOTHER SCHOOL IN THIS BOARD

Last name _____ First name _____ School _____
Last name _____ First name _____ School _____
Last name _____ First name _____ School _____

GUARDIANSHIP, CUSTODY OR ACCESS RIGHTS

If there is a Court Order regarding guardianship rights, custody or access rights, **a copy of the Order must be placed in the student's file.**

Please indicate if any such document(s) exists: Yes No Copy of the document included

MEDICAL INFORMATION

Student's Alberta Personal Health Number _____

Student's medical condition

Diabetes Epilepsy Asthma Heart condition Autism
 EpiPen Allergies, please specify _____ Other, please specify _____

Medical notes (e.g. medication) _____

SCHOOL HISTORY

Name of previous school _____ Grade _____

_____ City or Town _____ Province _____ Country _____

Services given to student at previous school (*specialized intervention, speech therapy, francisation, ESL, other*)

CORRESPONDENCE

If requested, certain documents, letters and/or newsletters may be available in English for English-speaking parents.

In addition to French documents, I wish to receive documents available in English: Yes No

I agree to receive *Le Franco* at home free of charge, which includes the newsletter from the school district and its schools, L'Echo du Centre-Nord, from September 2018 to September 2019. Yes No

FIRST NATIONS, MÉTIS OR INUIT STATUS

If you wish to declare yourself as an Aboriginal person, please specify:

- First Nation (status) Métis
 First Nation (non-status) Inuit

For further information, please refer to <https://education.alberta.ca/system-supports/results-reporting/> or contact Alberta Education at 780-427-8501. If you have questions regarding the collection of student information by the school board, please contact the School Board Superintendent at 780-468-6440.

ALBERTA HUMAN RIGHTS

Section 11.1 of the Alberta Human Rights Act requires school boards to give notice to a parent or guardian when courses of study, educational programs, instructional materials, instruction or exercises include subject matter that deals primarily and explicitly with religion, sexuality or sexual orientation. To request an exemption, a parent must complete and submit to the school principal the Exemption Form: *Section 11.1 Alberta Human Rights Act* available in the registration section of our website centrenord.ab.ca/parents/inscriptions

PUBLIC OR CATHOLIC SCHOOL

In **EDMONTON**, Conseil scolaire Centre-Nord operates **three public schools** (À la Découverte, Gabrielle-Roy and Michaëlle-Jean) and **five Catholic schools** (Joseph-Moreau, Maurice-Lavallée, Notre-Dame, Père-Lacombe and Sainte-Jeanne-d'Arc). For more information, please consult the FAQ section of our website centrenord.ab.ca/parents/faq

FOR CATHOLIC SCHOOL REGISTRATION ONLY

Which sacrament(s) has the student received?

- Baptism Reconciliation First communion Confirmation

I acknowledge and agree that Catholic schools are responsible for transmitting values and Catholic philosophy, and that my child will live religious experiences that permeate school life expressed through prayer, liturgical activities, religious instruction and other, unless requesting an exemption for my child by filling out the student exemption FORM under Section 11.1 of the ALBERTA HUMAN RIGHTS ACT.

_____ Initials

DECLARATION

I have been informed that Conseil scolaire Centre-Nord operates public and Catholic schools in Edmonton. Yes No

I have been informed of the exemption under the *Alberta Human Rights Act*. Yes No

I have declared all the legal guardians of the student. Yes No

I hereby certify the above information to be true, correct and complete.

Date

Signature (parent/legal guardian or independent student)



FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY (FOIP)

Since September 1, 1998, all school boards in Alberta are subject to the Freedom of Information and Protection of Privacy (FOIP) Act. The FOIP Act sets out policy and regulation relating to the collection, use, protection and disclosure of personal information that is not authorized under the School Act. The personal information collected on the student registration form is used to provide an education program and ensure a safe and secure school environment.

When parental consent is not required:

- for use within the school
- for the delivery of educational services and programs
- during a public activity held outside school grounds
- during a school activity where parents and members of the public are invited (e.g. school concert)

Please check the boxes for these three categories of permission:

• I hereby give CSCN permission to photograph, video tape, audio tape and/or interview my child while he/she is under the supervision of CSCN. I understand that the photos, audio and visual tapes and interviews may be used by CSCN in district or school displays, publications, websites, other electronic media and advertising or promotional materials.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• I hereby give CSCN permission to use, publish, display and copyright any work, written material or creative work created or authored by my child through school activities. I understand that the artwork, written materials or creative work may be used by CSCN in district or school displays, publications, websites, other electronic media and advertising or promotional materials. I understand that CSCN may make minor edits as deemed appropriate.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
• I hereby give CSCN permission to permit outside organizations to photograph, video tape, audio tape and/or interview my child while he/she is under the supervision of CSCN. I understand that this means that a photograph(s), video(s), audio tape(s), interview(s), or likeness of my child may be collected, used, reproduced and broadcast by the outside organization. The CSCN is not responsible for the use of the material by the outside organization.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

To learn more about FOIP, please visit www.servicealberta.ca/foip/documents/faq-school_jurisdictions.pdf – If you have questions regarding the collection of student information by the school board, please contact the School Board at 780-468-6440.

EMAILS FROM SCHOOL, TEACHERS, SCHOOL COUNCIL AND CSCN

Canada's anti-spam legislation requires your authorization before communicating with you via email. These communications could include information regarding offers, advertising or events related to school activities like graduation yearbook, tickets sales, individual and classroom photos, field trips or cultural trips, etc. The school staff, the school council and Conseil scolaire Centre-Nord need your consent to communicate with you electronically (emails, Synrevoice, newsletters, etc.)

I accept to receive electronic communications from my child's school, his/her classroom, from the school council and the school board.		<input type="checkbox"/>
_____	Name of mother or legal guardian	_____
		Email
_____	Signature	_____
		Date
_____	Name of father or legal guardian	_____
		Email
_____	Signature	_____
		Date